

*IFW*

Atty. Docket No: BR040495 (1600-24)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT(S): Therin, et al.

EXAMINER: M.R. Tyson

SERIAL No.: 10/690,532

GROUP: Art Unit 3731

FILED: October 23, 2003

DATED: December 7, 2006

TITLE: **INTERMEDIATE COMPOSITE PART  
FOR FORMING REINFORCEMENT  
PROSTHESIS**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ Applicant claims small entity status of this application under 37 C.F.R. 1.27

☒ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE	ADDL. FEE		RATE	ADDL. FEE
TOTAL	* 16	MINUS	** 20	=	x 25=	\$		x 50=	\$
INDEP.	* 1	MINUS	*** 3	=	x 100=	\$	OR	x 200=	\$
					x 180=	\$		x 360=	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					TOTAL	\$ 0.00		TOTAL	\$ 0.00

\* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 20, write "20" in this space.

\*\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 3, write "3" in this space. The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Dated: December 7, 2006

*Nicole Risponé*  
Nicole Risponé

- ☐ Please charge Deposit Account No. 50-2140 in the amount of \$ . Two (2) copies of this sheet are enclosed.
- ☒ A check in the amount of **\$120.00** is enclosed to cover the requisite fee under 37 CFR 1.17(a)(1).
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

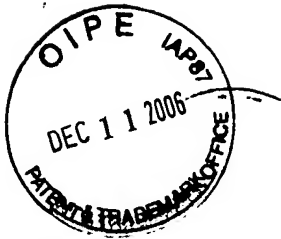


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Attorney for Applicant(s)

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Attorney Docket No. BR040495 (1600-24)

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FOR: **INTERMEDIATE COMPOSITE  
PART FOR FORMING  
REINFORCEMENT PROSTHESIS**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action mailed August 10, 2006, applicants submit this amendment and respectfully request reconsideration and allowance of the above-referenced application.

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** begin on page 3 of this paper.

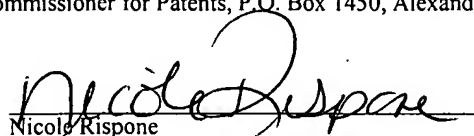
**Applicant's Remarks** begin on page 7 of this paper.

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Dated: December 7, 2006

  
Nicole Rispone